Employment Application Form SPANISH TRAIL LUMBER CO., L.L.C.

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE

APPLICATION FOR EMPLOYMENT	

PLEASE COMPLETE	PAGES 1-5.		DATE	
Name				
	Last	First	Middle	Maiden
Present address				
	Number	Street	City State Zip	
How long				
Telephone ()				
Position applied for (1)			Days/hours available to w	
and salary desired (2)			No Pref Thur _	
Be specific)			Mon Fri Tue Sat	
,			Wed Sun	
			Tred Guil _	
low many hours can y	ou work weekly?			
			Can you work nights?	
Employment desired	□FULL-TIME ONLY	□PART-TIME O	Can you work nights?	
Employment desired	□FULL-TIME ONLY		Can you work nights?	
Employment desired	□FULL-TIME ONLY		Can you work nights?	
Employment desired When available for work	□FULL-TIME ONLY		Can you work nights?	
Employment desired When available for work	□FULL-TIME ONLY	LOCATION	Can you work nights? NLY	ART-TIME
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APPLICATION FOR EMPLOYMENT										
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Driver's lic	cense			State o	fissue _		□ Operator	□ Comn	nercial (CDL)	□Chauffeur
Expiration	date			e.						
					OFFI	CE ONLY				
Typing	☐ Yes		WPM			☐ Yes ☐ No		ssing	□ Yes	WPM
Personal Computer	☐ Yes ☐ No	PC Mac	0			Other Skills				
Please list	two reference	es other th	an relative	s or prev	ious emp	loyers.				
Name						Name				
Position										
Company	r 									
Address		3			_	Address				
Telephone	(_)					Telephon	e ()			
space belo	tion form som ow to summar are applying.	etimes ma ize any ad	akes it diffici ditional inf	cult for ar ormation	n individu necessa	al to adequa y to describ	ately summariz se your full qua	te a compl alifications	lete backgroun for the specific	d. Use the position for
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APPLICATION F	OR EMPLOYMENT		Di .			
MIL	ITARY					
HAVE YOU EVED BEEN IN THE ADMED FOROSCO	D.V.		,			
HAVE YOU EVER BEEN IN THE ARMED FORCES?	☐ Yes ☐ No					
ARE YOU NOW A MEMBER OF THE NATIONAL GUARD?	☐ Yes ☐					
Specialty Date E	ntered	Discharge Date	e			
Work Experience Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.						
Name of employer Address	Name of last supervisor	Employment dates	Pay or salary			
City, State, Zip Code Phone number		From	Start			
		То	Final			
	Your last job title					
Reason for leaving (be specific)						
List the jobs you held, duties performed, skills used or learned, company.			3 + H			
Name of employer Address	Name of last supervisor	Employment dates	Pay or salary			
City, State, Zip Code Phone number	-	From	Start			
		То	Final			
	Your Last Job Title					
Reason for leaving (be specific)			·			
List the jobs you held, duties performed, skills used or learned, company.	advancements or proi	notions while you wor	ked at this			

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City, State, Zip Code Phone number				From	Start
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Reason for leaving (be specific)					
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Reason for leaving (be specific)	7.5				
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			1		
May we contact your present employer?	□ Yes	□ No			
Did you complete this application yourself	□ Yes	□ No			* *
If not, who did?			-		

IMPORTANT

Are you authorized to work in the United States of America? (circle one)

YES NO

Spanish Trail Lumber participates in E-Verify to insure that all new employees (after hired) are authorized to work in the United States of America. Spanish Tail Lumber does not pre screen applicants for authorization to work in the United States of America. Only after an employee is hired and begins work does Spanish Trail verify authorization to work as outlined in the E-Verify memorandum of understanding. Please read attached information concerning your rights.

Spanish Trail Lumber is a drug free work place.

Spanish Trail Lumber will require drug testing once an offer of employment has been extended. Continued employment depends on your ability to comply with our drug free work place requirements. Spanish Trail Lumber will require drug testing based upon reasonable suspicion or injury requiring more than first aid care rendered on site.

This Organization Participates in E-Verify



This employer will provide the Social Security Administration (SSA) and, if necessary, the Department of Homeland Security (DHS), with information from each new employee's Form I-9 to confirm work authorization.

IMPORTANT: If the Government cannot confirm that you are authorized to work, this employer is required to give you written instructions and an opportunity to contact DHS and/or the SSA before taking adverse action against you, including terminating your employment.

Employers may not use E-Verify to pre-screen job applicants and may not limit or influence the choice of documents you present for use on the Form I-9.

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To determine whether Form I-9 documentation is valid, this employer uses E-Verify's photo matching tool to match the photograph appearing on some permanent resident cards, employment authorization cards, and U.S. passports with the official U.S. government photograph. E-Verify also checks data from driver's licenses and identification cards issued by some states.

If you believe that your employer has violated its responsibilities under this program or has discriminated against you during the employment eligibility verification process based upon your national origin or citizenship status, please call the Office of Special Counsel at 800-255-7688, 800-237-2515 (TDD) or at www.justice.gov/crt/osc.

E-Verify Works for Everyone

For more information on E-Verify, please contact DHS:

888-897-7781

www.dhs.gov/E-Verify

NOTICE:

Federal law requires all employers to verify the identity and employment eligibility of all persons hired to work in the United States.

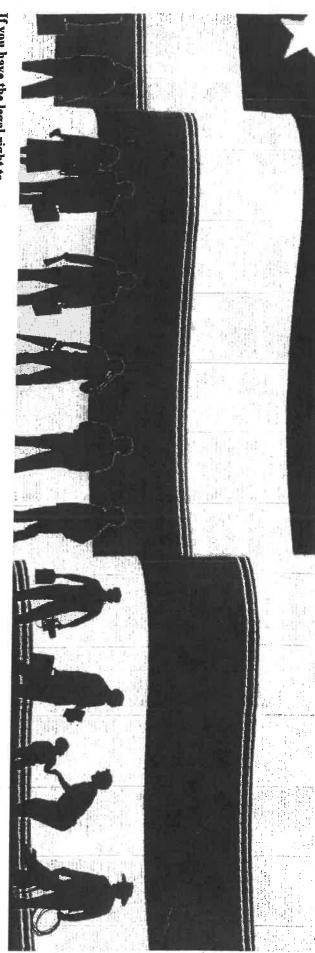




E-VERIFY IS A SERVICE OF DHS AND SSA

The E-Verify logo and mark are registered trademarks of Department of Homeland Security. Commercial sale of this poster is strictly prohibited.

IF YOU HAVE THE RIGHT TO WORK, Don't let anyone take it away.



If you have the legal right to work in the United States, there are laws to protect you against discrimination in the workplace.

You should know that -

- In most cases, employers cannot deny you a job or fire you because of your national origin or citizenship status or refuse to accept your legally acceptable documents.
- Employers cannot reject documents because they have a future expiration date.

- Employers cannot terminate you because of E-Verify without giving you an opportunity to resolve the problem
- In most cases, employers cannot require you to be a U.S. citizen or a lawful permanent resident.

If any of these things have happened to you, contact the Office of Special Counsel (OSC).

For assistance in your own language: Phone: 1-800-255-7688 or (202) 616-5594

For the hearing impaired: TTY 1-800-237-2515 or (202) 616-5525

E-mail: osccrt@usdoj.gov

Or write to:
U.S. Department of Justice – CRT
Office of Special Counsel – NYA
950 Pennsylvania Ave., NW
Washington, DC 20530

U.S. Department of Justice Civil Rights Division

Office of Special Counsel for Immigration-Related Unfair Employment Practices



www.justice.gov/crt/about/osc

PLEASE READ CAREFULLY

APPLICATION FORM WAIVER

In exchange for the consideration of my job application by Spanish Trail Lumber Co., L.L.C. (hereinafter called "the Company"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Spanish Trail Lumber Co., L.L.C. or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President /General Manager of the Company. Both the undersigned and Spanish Trail Lumber Co., L.L.C. may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contract.

I also understand that (1) the Company has a drug and alcohol policy that provides for preemployment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the Company, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with the Company shall be probationary for a period of sixty (60) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

Signature of applicant	· .	Date:	
4			

This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.